Fill in this inf	ormation to id	entify your	case:				
Debtor 1	Stephen	T.	Ensign Last Name				
	First Name	Middle Name					
Debtor 2 (Spouse, if filing)	Laura First Name	A. Middle Name	Ensign Last Name				
United States Ba	nkruptcy Court for	the: DISTRIC	OF OREGON				
Case number (if known)	Case number					Check if this is amended filing	an
Official Form	106D			I In a Dunn			12/15
			Claims Secure				
On the top of any 1. Do any credi	on. If more space and ditional pages itors have claims eck this box and si	is needed, co , write your na secured by yo ubmit this form t	me and case number ((if known).		y responsible for suppers, and attach it to this and attach it to this along the state of the same and attach it to this along the same and the same are same and the same are same at the same at the same are same at the sa	
Yes. Fill in all of the information below.							
Part 1: Li	st All Secured	Claims					
creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the					mn A unt of claim ot deduct the e of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1		Descr	ibe the property that es the claim:		\$420.00	\$500.00	
Gratteri Les So Creditor's name PO Box 667 Number Street	:hwab	secur Tires					
			the date you file, the o	claim is: Chec	k all that apply.		
Prineville OR 97754 City State ZIP Code Disputed Who owes the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim relates to a community debt □ Contingent □ Unliquidated □ Disputed Nature of lien. Check all that apply. Nature of lien. Check all that apply. Statutory lien (such as mortgage or secured car loan) □ Statutory lien (such as tax lien, mechanic's lien) □ Judgment lien from a lawsuit □ Other (including a right to offset) Account							
Date debt was i	ncurred Opene	ed 2010 Last	4 digits of account nu	mber			

Add the dollar value of your entries in Column A on this page. Write that number here:

\$420.00

Debtor 1 Stephen T. First Name Middle Nam		T. Middle Name	Ensign Last Name	Case number (if known)			
Part 1:	Additional P After listing an sequentially from		age, number them age.	Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any	
2.2			cribe the property that ures the claim:	\$626,636.00	\$485,000.00	\$141,636.00	
US Bank Creditor's name 800 Nicollet Mall Number Street			25 NW Mount Richmond Gaston, OR 97116				
			of the date you file, the clain Contingent	n is: Check all that apply.			
Minneap City	0110	5402	Unliquidated Disputed				
Who owe	s the debt? Check	one. Nati	ure of lien. Check all that ap	pply.			

An agreement you made (such as mortgage or secured car loan)

Statutory lien (such as tax lien, mechanic's lien)

Judgment lien from a lawsuit

Last 4 digits of account number

Other (including a right to offset)

Add the dollar value of your entries in Column A on this page. Write that number here:

\$626,636.00

\$627,056.00

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2 only

Check if this claim relates to a community debt

Date debt was incurred

At least one of the debtors and another

Debtor 1	Stephen	Т.	Ensign	Case number (if known)	
Besto, 1	First Name	Middle Name	Last Name		
Part 2			r a Debt That You		
example,	if a collection age the collection agen dditional creditors	ncy is trying to collec	t from you for a debt	ptcy for a debt that you already listed in Part 1. For you owe to someone else, list the creditor in Part 1, and one creditor for any of the debts that you listed in Part 1, s to be notified for any debts in Part 1, do not fill out or	
1 0	Ocwen Loan Serv	icing		On which line in Part 1 did you enter the creditor?	2.2
1 1	lame 2650 Ingenuity D Number Street			Last 4 digits of account number	_
	Orlando City		FL 32826 State ZIP Code		
2	Robinson Tait PS			On which line in Part 1 did you enter the creditor?	2.2
1	Name 710 Second Ave : Number Street			Last 4 digits of account number	_

98104ZIP Code

WA

State

Seattle City